

Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name: Western Reception Diagnostic & Correctional Center (WRDCC)			
Custody Level	C 1-5	Warden	Ryan Crews
Total Acreage	158 (Approx.)	Address	3401 Faraon St.
Acreage w/in Perimeter	71 (Approx.)		St. Joseph, MO 64506
Square Footage	All Buildings – 720,000	Telephone:	816-387-2158
Year Opened	1999	Fax:	816-387-2217
Operational Capacity/Count (as of December 23, 2014)	1968/2001		
General Population Beds (capacity and count as of December 23, 2014)	846/740	Deputy Warden	Richard Stepanek
Segregation Beds (capacity and count as of December 23, 2014)	136/118	Deputy Warden	Sherie Korneman
Treatment Beds (capacity and count as of December 23, 2014)	595/555	Asst. Warden	Ryan Brownlow
Work Cadre Beds (capacity and count as of December 23, 2014)	None	Asst. Warden	Vacant
Diagnostic Beds (capacity and count as of December 23, 2014)	440/409	Major	Chris Brewer
Protective Custody Beds (capacity and count as of December 23, 2014)	None		

1. Capital Improvement Needs:

- a. How would you rate the overall condition of the physical plant of the institution?

Good

What capital improvement projects do you foresee at this facility over the next six years?

- 1. Replace roof, flashing, guttering and install metal siding to old Cold Storage building (#29403).*
- 2. Install additional perimeter fence and gate to enclose building #'s 29410 & 29409 inside the perimeter.*
- 3. Replace roof on Laundry building (#29405).*
- 4. Replace roof on Education/Whse/Canteen building (#29407).*
- 5. Replace roof, tuck-point, waterproof and replace guttering on ILS building (#29418).*
- 6. Replace fire alarm system in R&D building (#29438).*
- 7. Repair brick and concrete in utility tunnels.*
- 8. Tuck-point and waterproof HU#1 (#47011).*
- 9. Upgrade existing 120/208v electrical system in HU#11 (#29400).*
- 10. Replace roof on old state garage (#470006).*

- 11. Tuck-point, waterproof and replace windows in Education building (#29407).*
- 12. Replace two (2) 2100 gallon water heaters in the Powerhouse (#29404).*
- 13. Tuck-point, waterproof and replace windows in old state garage (#29406).*
- 14. Tuck-point, waterproof and replace windows in the Maintenance building (#29417).*
- 15. Replace air handlers in HU#1 (#29411).*
- 16. Install new fire detection system, HVAC and electrical service to ILS building (#29418).*
- 17. Replace electrical overhead drops to underground service, install new 1200 amp service main panel and transformer at the Maintenance building (#29417).*
- 18. Apply six (6) inch asphalt overlay to maintenance access road.*
- 19. Repair and overlay asphalt roadways, perimeter road and parking lots, re-stripe main parking area.*
- 20. Remove/demolition of Progress Hall (#29416).*
- 21. Build new multipurpose building where Progress Hall is.*

- b. How critical do you believe those projects are to the long-term sustainability of this facility?
Very critical.

2. Staffing:

- a. Do you have any critical staff shortages?
Vacancies: 2 Cook II, 1 COI, 1 CSI, 1 CCM, 1 Boiler Operator, 2 FUM, 1 OSA-K, 1 ROI, 1 SOSA, 1 SAC II.

Corrections Officers and Cook positions are always hard to fill because very few applicants are on the register. In my opinion due to staffing levels, each vacancy would be critical.
- b. What is your average vacancy rate for all staff and for custody staff only?
There is an average vacancy rate for all staff of 12.66% and 12.19% for custody staff.
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution?
Yes, the accrual/usage of compensatory time presents a daily challenge to custody supervisors in order to minimize accruals as well as grant staff leave time off in a manner which ensures adequate daily staffing while accommodating staff requests for leave.
- d. What is the process for assigning overtime to staff?
The vast majority of overtime accrued is the result of holidays. The earned overtime is primarily accrued in areas such as transportation runs. All other overtime accrued by staff is assigned first by requesting volunteers and then by assignment based on inverse seniority if no volunteers are found.
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?
Approximately 56% of comp time accrued is paid off; 44% is used.
- f. Is staff able to utilize accrued comp-time when they choose?
Every effort is made to accommodate staff requests. In most cases, staff utilize accrued compensatory time on dates of their choice based on the needs of the facility.

3. Education Services:

- a. How many (and %) of inmate students at this institution are currently enrolled in school?
 - *We have a total of 60 offenders enrolled in school. This is approximately 14% of the general population as of 12/9/14.*
 - *The Treatment center has 147 students enrolled in school on a part time basis. This is approximately 28% of the treatment population*
- b. How many (and %) of inmate students earn their HSE each year in this institution?
 - *We have had a total of 35 offenders obtain their HSE, which is 6% of those enrolled, as of December 9, 2014 for 2014. The treatment center has had a total of 71 offenders obtain their HSE (14% of those enrolled) as of December 9, 2014.*
- c. What are some of the problems faced by offenders who enroll in education programs?
 - *There is not enough time at WRTC; students only get about 6 hours per week.*
 - *They are on their way home so motivation can be an issue.*
 - *It takes a long time to stay on task in class or when you take the HSE and their attention spans are sparse.*
 - *There are other obligations within the institution that takes time away from their studying.*
 - *Conflict with other required programs*
 - *Entry level academic skills*
 - *Low self-esteem related to educational history*
 - *Family and social stressors*
 - *Mental disorders*
 - *Medical conditions*

4. Substance Abuse Services:

- a. What substance abuse treatment or education programs does this institution have?
Partial Day Treatment Program WRDCC has treatment programs run Division of Offender Services and Gateway, a contract provider. The following programs are offered.
 - *180-OUT, Offenders Under Treatment, 6 Month Program*
 - *BSAP, Board Ordered 6 Month Program*
 - *120-Day Treatment, Court and Board Ordered*
 - *Post Conviction Treatment*
 - *84 Day Parole Violator Treatment*
 - *120-Day Court Ordered Detention Sanction Program (CODS)*
 - *Partial Day Treatment Program*
- b. How many beds are allocated to those programs?
 - *BSAP, Board Ordered 6 Month Program (Gateway) - 135*
 - *180-OUT, Offenders Under Treatment, 6 Month Program (DORS) – 45*
 - *120-Day Treatment (Gateway) – 140*
 - *120 Day/Post Conviction/Parole Violator/CODS (DORS)-275*
 - *Partial Day Treatment Program (Gateway) - 50*
- c. How many offenders do those programs serve each year?
 - *BSAP, Board Ordered 6 mo. Program (Gateway) – 311 (July 2013 to July 2014)*
 - *180-OUT, Offenders Under Treatment, 6 mo. Program (DORS) – 551*

- *120-Day Treatment (DORS)-1859*
- *120-Day Treatment (Gateway) – 559 (July 2013 to July 2014)*
- *Post Conviction Treatment (DORS)-243*
- *Post Conviction Treatment (Gateway)-60*
- *84 Day Parole Violator – 905*
- *CODS –(DORS)-354*
- *CODS-(Gateway)-76*

- d. What percent of offenders successfully complete those programs?
- *BSAP, Board Ordered 6 mo. Program (Gateway) - 86%*
 - *120-Day Treatment (Gateway) - 93%*
 - *120-Day Treatment (DORS) – 99%*
 - *180-OUT, Offenders Under Treatment, 6 mo. Program (DORS) – 98%*
 - *Post Conviction Treatment (DORS) – 98%*
 - *Post Conviction Treatment (Gateway)-99%*
 - *84 Day Parole Violator – 99%*
 - *CODS (DORS)-98%*
 - *CODS (Gateway)-98%*

- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?

Establishing a level of trust to deal with issues of the clients' former lifestyles. Breaking through the denial of the seriousness of a client's substance abuse/dependency and criminal lifestyle is a task. Management of the MH-3 / MH-4 clients and dual diagnosed offenders. The biggest challenge at this time is receiving a higher number of disruptive, young and challenging offenders than in the previous years. We appear to be getting higher custody level offenders with a more violent past. Also, consistency among staff is also a huge challenge. It is often difficult to get all of the staff on the same page and keeping it continually consistent due to constant changes.

5. Vocational Programs:

- a. What types of vocational education programs are offered at this institution?
WRDCC does not have any vocational programming
- b. How many offenders (and %) participate in these programs each year?
N/A
- c. Do the programs lead to the award of a certificate?
N/A
- d. Do you offer any training related to computer skills?
No

6. Missouri Vocational Enterprises:

- a. What products are manufactured at this institution?
None
- b. How many (and %) of offenders work for MVE at this site?
None

- c. Who are the customers for those products?
N/A
- d. What skills are the offenders gaining to help them when released back to the community?
N/A

7. Medical Health Services:

- a. Is the facility accredited by the National Commission on Correctional Health Care?
Yes
- b. How many offenders are seen in chronic care clinics?
Approximately 300 a month are for routine chronic care visits by either nursing or physician.
- c. What are some examples of common medical conditions seen in the medical unit?
Back pain, athlete's foot, sinus congestion, sports injuries, heartburn.
- d. What are you doing to provide health education to offenders?
Annual health fair, education during nursing and provider appointments, pamphlets available in medical waiting rooms, occasional use of offender information channel (TV).
- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond?
No active cases of TB have been identified in the facility.
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain.
Yes, however most aged offenders have a higher medical score than can be accommodated at WRDCC, so we have not seen a significant effect in population.

8. Mental Health Services:

- a. How do offenders go about obtaining mental health treatment services?
Upon arrival at WRDCC R&D unit, every offender responds to questions on an Intake Mental Health Screening form completed by a medical nurse. Offenders arriving with verified psychotropic medication have an immediate face to face evaluation with a Qualified Mental Health Professional (QMHP). A QMHP is a Missouri Licensed Psychologist, Counselor, or Social Worker. There is a suicide risk potential that also provides an immediate face to face evaluation.

In the medical screening room, there is a large copy of a Medical Service Request (MSR). During the Mental Health Intake, offenders are again educated on the MSR process. The Mental Health Intake is a structured clinical interview that determines Mental Health Level and need of services. The Intake is conducted between day 5 & 14 of the Diagnostic process.

The Referral and Screening Note (RSN) may be completed and submitted by any staff member, which again results in an individual encounter with a QMHP. All QMHP's have a caseload of Mental Health 3 offenders and also to handle emergency services, as needed

in their assigned housing units. In the evenings and on weekends and holidays, QMHP's rotate on-call to ensure 24 hour coverage for all offenders.

Staff in various housing units refer offenders to a variety of Mental Health groups ranging from Adjustment to Incarceration, Anger Management and Trauma Groups.

- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?

There have been no completed suicides since WRDCC opened in 1999. There is close communication between DOC staff and Mental Health, with a very proactive approach regarding intervention. All WRDCC staff attend CORE training yearly. Suicide Prevention training includes information and education including risk factors.

Mental Health now has 9 single camera cells which are monitored by custody not less than 4 times an hour. We also have access to 2 additional camera cells in the TCU. QMHP's have daily contact with the Offender to evaluate the level of risk and supervision needed with custody providing timely and relevant information by documentation in the chronology file, as well as informing mental health of their observations to assist in modifications for the offenders on suicide watch.

- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? 410 (20.67%)

- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

There are 9 (MH 4) offenders in the diagnostic center at this time that are seen weekly to monitor stability/symptoms of mental illness. They are also referred, as criteria applies, to the Social Rehabilitation Unit (SRU) at FCC, The Special Needs Unit (SNU) at PCC, or the Secure Social Rehabilitation Unit (SSRU) at JCCC.

Offenders who are at risk in general population due to mental illness can be placed on Close Observation pending transfer or assimilation to general population with symptom management.

Offenders with acute psychiatric symptoms that meet criteria as an imminent risk of harm to self and/or others and other criteria may be referred by the psychiatrist for a Due Process and Involuntary Medication Hearing. No Involuntary Medication Hearings were held this year.

All offenders with a Mental Health diagnosis participate in the creation of an Individual Treatment Plan to identify problems and goals. These offenders are placed in Mental Health Chronic Care. These offenders meet with a QMHP at least once a month and sooner if needed. They have regular appointments with a staff psychiatrist and a psychiatric nurse. In addition to regular appointments with the psychiatrist, there is an Advanced Practice Nurse, and a Psychiatric RN.

WRDCC has also been chosen as one of 3 diagnostic centers to participate in a new sentencing statute for several mentally ill offenders with a 120 Mental Health Treatment Program in conjunction with Department of Mental Health, Jackson County and Probation and Parole.

9. What is your greatest challenge in managing this institution?

The most challenging part is the overall management of the facility's workforce and the aging physical condition of many of the facility's buildings. Given the budgetary constraints and staffing reductions it is increasingly challenging to ensure appropriate maintenance of infrastructure and necessary staffing for adequate monitoring of all institutional functions. This can have an impact on staffs' working conditions and overall morale.

10. What is your greatest asset to assist you in managing this institution?

The staff are the greatest asset, followed by the support provided by the Division's executive staff. The facility's executive staff, section heads, and shift commanders continue to make it possible to manage the institution in a safe and effective manner.

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

Fleet Vehicles

Mileage as of December 1st, 2014

7 Crown Vic.	Mileage	Year	Status
13-0010	103,352	2007	Inmate Trans.
13-0025	95,355	2007	Inmate Trans.
13-0352	172,345	2003	Perimeter Patrol
13-0396	93,923	2006	Inmate Trans.
13-0705	165,592	2004	Perimeter Patrol
13-0724	82,033	1998	Specialty Cert
13-0792	80,157	2008	Inmate Trans.

6 Max Vans

13-0268	111,723	2006	Inmate Trans./Sec. Cage
13-0278	174,868	2007	Inmate Trans.
13-0346	159,173	1997	Inmate Trans. Handicap
13-0394	201,659	2006	Inmate Trans.
13-0730	83,729	1998	Specialty Cert
13-0872	9,430	2014	Inmate Trans.

1 Bus

13-0101	1,658	2015	Inmate Trans.
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3 Mini Vans

13-0675	189,415	2008	Inmate Trans.
13-0677	183,743	2008	Inmate Trans.
32-0259	176,358	2008	Inmate Trans.

4 Impalas

13-0233	117,263	2008	Pool
13-0239	118,770	2008	Pool
13-0242	116,535	2008	Pool
13-0246	117,844	2008	Pool

1 Suburban

13-0707	50,699	1999	Specialty Cert
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*Vehicle 13-0332 Crown Vic. went to ERDCC so we could get new 15 Passenger Van 13-0872.
Vehicle 13-0372 International Bus went to BCC so we could get new Blue Bird Bus 13-0101.*

Vehicle 13-0346 Handicap Van is out-of-service due to a wreck.

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer)**

Staff morale would be rated as medium; due in part to the reduction in staff over the last several years and lack of cost of living raises. They have also been required to do more because of less staff. Most take pride in what they do and continue to perform their duties in a professional manner. Each has an opinion as to the problems within the department from health care benefits to the working conditions of being constantly short staffed, with that they continue to perform all assigned duties and bring credit to themselves and this institution.

13. Caseworkers:

- A. How many caseworkers are assigned to this institution?

- *Grievance Office - 1 Corrections Case Manager Housing Unit #1(Treatment) - 4 Corrections Case Managers , 1 Corrections Classification Assistant*
- *Housing Unit #6 (Transitional Housing Unit and Work Release) - 6 Corrections Case Managers, 1 Corrections Classification Assistant, 1 Institutional Activity Coordinator*
- *Housing Unit #10 (Diagnostic Center) - 1- Corrections Case Manager III , 8- Corrections Case Managers*
- *Housing Unit #10 (Administrative Segregation) - 2- Corrections Case Managers*
- *Housing Unit #11(General Population) - 6 – Corrections Case Managers, 1 - Corrections Classification Assistant*
- *Grievance Office - 1 Corrections Case Manager*

- B. Do you currently have any caseworker vacancies?

No

- C. Do the caseworkers accumulate comp-time?

Yes, but we encourage the use of flex scheduling to avoid accumulation of any overtime.

- D. Do the caseworkers at this institution work alternative schedules?

No.

- E. How do inmates gain access to meet with caseworkers?

Through an open-door policy, by submitting written request, or by being placed on a call-out list.

- F. Average caseload size per caseworker?

Approximately 71 Offenders to 1 Caseworker.

- # of disciplinary hearings per month?
 - *Housing Unit #1 – 125.1 monthly average*
 - *Housing Unit #6 – 74.5 monthly average*
 - *Housing Unit #10 – 114.8 monthly average*
 - *Housing Unit #11 – 120.8 monthly average*

- # of IRR's and grievances per month?
 - *Housing Unit #10 – 19 monthly average*
 - *Housing Unit #1 – 6.3 monthly average*
 - *Housing Unit #6 – 15.1 monthly average*
 - *Housing Unit #11 – 27.2 monthly average*
 - *Grievances (entire facility) – 30.6 monthly average*
 - *810 Total IRRs for 2014*
 - *337 Total Grievances for 2014*
- # of transfers written per month?
 - *Housing Unit #1 – 4.3 monthly average*
 - *Housing Unit #6 – 10.2 monthly average*
 - *Housing Unit #11 – 15.7 monthly average*
 - *Housing Unit #10 - averages 0 (Transfers do not include those offenders sent out of the Diagnostic Center to other facilities; only transfers written and submitted to Central Transfer Authority.)*
- # of re-classification analysis (RCA's) per month?
 - *Housing Unit #1 – 17.7 monthly average*
 - *Housing Unit #6 – 37.5 monthly average*
 - *Housing Unit #11 – 26.8 monthly average*
 - *Housing Unit #10 - 227 RCA's/ICA's monthly average (This includes diagnostic offenders)*

G. Are there any services that you believe caseworkers should be providing, but are not providing?
No

H. If so, what are the barriers that prevent caseworkers from delivering these services? *N/A*

I. What type of inmate programs/classes are the caseworkers at this institution involved in?
Pathways to Change, Impact of Crime on Victims Class, Inside Out Dads, Anger Management.

J. What other duties are assigned to caseworkers at this institution?

Notary services, classification file reviews, process all visiting forms, process death and critical illness notices, make all housing and job assignments, case management team member, Offender External Classification, TAP (Transitional Accountability Plans), contacting outside agencies for referral services, possible enemy/protective custody investigations, order supplies and maintain inventory for housing units, back-up for custody staff, searches and counts, attend mandatory meetings (Medical, Fire/Safety), provide daily counseling to offenders, diagnostic processing, PREA risk assessments, offender orientation, process offender order forms, escort offenders to video court, process applications for offender work release and fill in as acting Functional Unit Manager when needed. Required to obtain 30 hours of training per year.

14. Institutional Probation and Parole officers:

A. How many parole officers are assigned to this institution?
13 POII's, 1 POIII

B. Do you currently have any staff shortages?

Waiting to fill one position which should occur soon.

C. Do the parole officers accumulate comp-time?

On rare occasions.

D. Do the parole officers at this institution flex their time, work alternative schedules?

Yes

E. How do inmates gain access to meet with parole officers?

Open door, callouts, and written correspondence

F. Average caseload size per parole officer? *140*

- # of pre-parole hearing reports per month? *90*
- # of community placement reports per month? *30-40*
- # of investigation requests per month? *190-210*

G. Are there any services that you believe parole officers should be providing, but are not providing?

No

H. If so, what are the barriers that prevent officers from delivering these services?

N/A

I. What type of inmate programs/classes are the parole officers at this institution involved in?

Two officers are trained for Pathways to Change and two are trained for Anger Management.

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

I would mention that the last few years have been difficult for corrections, as I am sure it has been for many other agencies. Staffing reductions have impacted workload and budget cuts have made it difficult to replace aging equipment or appropriately complete building maintenance, all of which impacts working conditions and morale. Salaries and benefits are also big concerns for staff. The price of consumer products and durable goods has gone up; however, there has only been modest cost of living increases in the last few years. An increasingly higher number of staff are faced with the decision to change their standard of living or find part time employment. Changes to benefit plans over the years have also increased out of pocket expenses, adding to the financial challenges staff are experiencing. Although this has not changed the last two years, there is still a degree of anxiety about the future. Many have left State service for higher paying positions and/or better benefits in order to support their families. This results in staffing shortages which can be difficult to overcome due to the aforementioned reduced staffing. All of this compounds the struggles we face with the recruitment and retention of skilled staff.

16. Does your institution have saturation housing? If so, how many beds?

Housing Unit #10 has 286 saturation/temporary beds.

17. Radio/Battery Needs:

- a. What is the number of radios in working condition? *430*

- b. Do you have an adequate supply of batteries with a good life expectancy? *Yes*
- c. Are the conditioners/rechargers in good working order? *Yes*